FORM D

UNITED STATES **SECURITIES AND EXCHANGE COMMISSION** Washington, D.C. 20549

139766	OMB APPROVAL
MMISSION	OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response: 16.00



FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix		Serial			
		1			
	DATE	RECEIVED			
	1				

Name of Offering (check if this is an amendr	ment and name has changed, and indicate change.)	
Goldman Sachs Select Fund, Ltd.: Share		
Filing Under (Check box(es) that apply):		Section 4(6) ULOE
Type of Filing:	ment	
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1. Enter the information requested about the iss		
Name of Issuer (check if this is an amendr	nent and name has changed, and indicate change.)	
Goldman Sachs Select Fund, Ltd.		
Address of Executive Offices (1	Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Goldman Sachs Hedge Fund Strategie Jersey 08540	es LLC, 701 Mount Lucas Road, Princeton, New	(609) 497-5500 RECEIVED
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	<	SFP 1 9 2007
Brief Description of Business		4
To operate as a private investment fund.		200
True of Business Organization		200759
Type of Business Organization Corporation	☐ limited partnership, already formed	other (please specify);
☐ business trust	☐ limited partnership, to be formed	other (please specify): Exempted Limited Company OCESSE
	Month Year	✓ Actual ☐ Estimated SEP 2 5 2007
Actual or Estimated Date of Incorporation or O	rganization: 0 1 0 7	
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia	
•	State: CN for Canada: FN for other foreign jur	isdiction) FIN FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be

photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (7-00)

A BASIC IDENTIFICATION DATA BENEFICIATION OF THE PARTY OF Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ablaGeneral and/or ☐ Promoter Beneficial Owner Executive Officer Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Investment Manager) Business or Residence Address (Number and Street, City, State, Zip Code) 701 Mount Lucas Road, Princeton, New Jersey 08540 General and/or-☐ Beneficial Owner ☐ Executive Officer ☐ Director* ☐ Check Box(es) that Apply: Promoter Managing Partner of the Issuer's Investment Manager Full Name (Last name first, if individual) Barbetta, Jennifer (Number and Street, City, State, Zip Code) Business or Residence Address c/o Goldman Sachs Hedge Fund Strategies LLC, 32 Old Slip, New York, New York, 10005 ☐ Beneficial Owner ☐ Executive Officer ☑ Director* □ General and/or ☐ Promoter Check Box(es) that Apply: *of the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Clark, Kent A. (Number and Street, City, State, Zip Code) Business or Residence Address c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 Executive Officer Director* General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ *of the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Lawson, Hugh J. (Number and Street, City, State, Zip Code) Business or Residence Address c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 General and/or ☐ Beneficial Owner ☐ Executive Officer ☐ Director □ Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or □ Promoter Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner □ Executive Officer □ General and/or Director □ Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

3	建强计	F 3.5	THE WAY	BINI	FORMAT	ION ABO	UT OFFI	ERING :		g.mgg. bo	2423	
						-					Yes	No
1. Has the	e issuer sold	l, or does th	e issuer inte									Ø
			A	ınswer also	in Appendi	ix, Column	2, if filing u	inder ULOE	₹.			
2. What is the minimum investment that will be accepted from any individual?							\$1,000,000*					
*The Issue 3. Does to	er, in its sol he offering	le discretion permit joint	n, may acce ownership	pt subscript of a single	ptions below unit?	w the minin	num.			***************************************	Yes ☑	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								offering. th a state		_		
Full Name	(Last name	first, if ind	ividual)									
Goldman.	Sachs & C	'o.										
Business of	r Residence	Address (1	Number and	Street, City	, State, Zip	Code)						
85 Broad	Street Nev	Vork Ne	w York 100	04								
	ssociated B							·			• •	
			s Solicited									
(Check ".	All States" of	or check ind	lividual Stat	e s)						••••••		1 States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR] [WY]	[PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WI]	[FK]
ruii Name	: (Last name	: Hrst, 11 mu	iviuuai)									
				g g:	0 7.	<u> </u>						
Business o	r Residence	: Address ([Number and	Street, City	y, State, Zip	(Code)						
Name of A	ssociated E	roker or De	ealer	·		·- 						· · ·
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers	<u></u>	-	<u> </u>			
(Check ".	All States"	or check inc	lividual Stat	es)								1 States
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[MT]	[NE]	(NV)	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] {PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]		[171]	["1]	[1 1/]
T dil Marie	(Last name	, mst, mt	arradui.)									
Business of	or Residence	Address (1	Number and	Street, Cit	y, State, Zip	Code)		*				
Name of A	Associated E	Broker or De	ealer						<u>.</u>		<u> </u>	
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			s Solicited lividual Sta				•••••	•••••		••••••		All States
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price			Amount Already Sold
	Debt	\$_	0		\$_	0
	Equity (Shares)	\$	35,000,000	_	\$_	35,000,000
	☑ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$_	0		\$_	0
	Partnership Interests		0	_	\$_	0
	Other (Specify)	\$	0		\$	0
	Total	\$_	35,000,000	•	s -	35,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.	_		•	_	·····
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Aggregate
			Number Investors			Dollar Amount of Purchases
	Accredited Investors		16		\$_	
		-	0	-	٠ •	0
	Non-accredited Investors	_	N/A	-	Ψ-	N/A
	Total (for filings under Rule 504 only)	-	IVA	-	۳-	NIA
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of Security			Dollar Amount Sold
	Type of offering Rule 505		N/A		\$	N/A
	Regulation A	-	N/A	-	s -	N/A
	Rule 504	_	N/A	-	s -	N/A
			N/A	-	* - \$	N/A
t t	Total		17/3	-	* -	• ٧٠-٩
	Transfer Agent's Fees				\$_	0
	Printing and Engraving Costs				\$_	0
	Legal Fees		ゼ		\$_	11,121
	Accounting Fees				\$_	0
	Engineering Fees				\$	0
	Sales Commissions (specify finders' fees separately)				\$	0
	Other Expenses (identify)				\$	0
	- ····································		-	,	_	

G. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

• ;		IUMBER OF INVESTORS, EXP			UND USE OF FE	TOCE.	EDO	en e	
	 b. Enter the difference between the aggreg Question 1 and total expenses furnished difference is the "adjusted gross proceeds to 	in response to Part C - Question 4.a	. Th	is		s _		34,988,879	
5.	Indicate below the amount of the adjusted to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted groto Part C - Question 4.b. above.								
					Payments to Officers, Directors, & Affiliates			Payments To Others	
	Salaries and Fees			\$_	0		\$_	0	
	Purchase of real estate			\$_	0		s _	0	
	Purchase, rental or leasing and installation of	of machinery and equipment		\$_	0		\$_	0	
	Construction or leasing of plant buildings a	nd facilities		\$_	0		\$_	0	
	Acquisition of other businesses (including this offering that may be used in exchan another issuer pursuant to a merger)	ge for the assets or securities of		\$	0	0	\$	0	
	Repayment of indebtedness			\$ \$	0		s	0	
	Working capital		_	\$	0		\$	0	
	Other (specify): Investment Capital		0	٠ -	0	. – Ø	ς_	34,988,879	
	Column Totals			\$ - \$	0	. <u>-</u>	* - \$	34,988,879	
	Column Totals								
	Total Payments Listed (column totals added	34,988,879							
. ~.	49.	D. FEDERAL SIGNATUL	RE	1					
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.									
Issuer (Print or Type) Signature Date									
Go	Goldman Sachs Select Fund, Ltd. September 6, 2007								
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			}				
Ka	Kathryn Pruess Vice President of the Issuer's Investment Manager								

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

END